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Case 15-22623 Doc 1 Filed 06/30/15 Entered 06/30/15 17:04:29 Desc Main <u>B1 (Official Form 1) (04/13) Document Page 1 of 39</u>

United States Bankruptcy Court Northern District of Illinois					Vo	luntary Petition			
Name of Debtor (if individual, enter Last, First, Middle):  Cooper, Michael			Name of Jo	Name of Joint Debtor (Spouse) (Last, First, Middle):					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):					
Last four digits of Soc. Sec. or Individual-Taxpayer (if more than one, state all): 0133	I.D. (ITIN) /Com	nplete EIN	Last four d				axpayer I	.D. (ITIN) /Complete EIN	
Street Address of Debtor (No. & Street, City, State 2313 Hudson Cir Aurora, IL	& Zip Code):		Street Add	ress of Jo	int Deb	tor (No. & Stree	et, City, S	tate & Zip Code):	
Autora, in	ZIPCODE <b>60</b>	502					ZIPCODE		
County of Residence or of the Principal Place of Bu <b>DuPage</b>	isiness:		County of	Residence	e or of the	he Principal Plac	ce of Busi	iness:	
Mailing Address of Debtor (if different from street	address)		Mailing A	ddress of	Joint De	ebtor (if differen	t from str	reet address):	
	ZIPCODE							ZIPCODE	
Location of Principal Assets of Business Debtor (if	different from str	eet address a	above):						
								ZIPCODE	
Type of Debtor (Form of Organization) (Check one box.)  ✓ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtor Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Filing Fee (Check one box)  ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable only). Must attach signed application for the couconsideration certifying that the debtor is unable except in installments. Rule 1006(b). See Official ☐ Filing Fee waiver requested (Applicable to chapt only). Must attach signed application for the couconsideration. See Official Form 3B.	Single As U.S.C. §  Railroad Stockbrol Commod Clearing Other  Debtor is Title 26 of Internal F	toto (151B)  ker Bank  Tax-Exem Check box, if a tax-exemp of the United Revenue Cod  Check one Debtor Check if: Debtor's than \$2, Check all A plan	pt Entity f applicable.) ot organization States Code (tile). e box: is a small busin is not a small busin is not a small busin applicable box is being filed w	Entity pplicable.) organization under tates Code (the  Chapter 11 Debtors  Chapter 11 U.S.C. § 101(51D). not a small business debtor as defined in 11 U.S.C. § 101(51D). policable boxes:  Chapter of Bankruptcy Cod the Petition is Filed (Check one Filed (Chepter 12 Chapter 12 Chapter 13 Recogning Nonmaing Nature of Debter (Check one box (Check one				y Code Under Which I (Check one box.) apter 15 Petition for cognition of a Foreign apter 15 Petition for cognition of a Foreign apter 15 Petition for cognition of a Foreign annual Proceeding  f Debts ne box.) ter Debts are primarily business debts.	
Statistical/Administrative Information  Debtor estimates that funds will be available fo	r distribution to u	accorda	ance with 11 U.			prependin from	one or in	THIS SPACE IS FOR COURT USE ONLY	
Debtor estimates that, after any exempt propert distribution to unsecured creditors.				id, there v	vill be n	o funds availabl	le for	COOKI OSE ONEI	
	5,00 000 10,00	1- 1	0,001- 25,000	25,001- 50,000		50,001- 100,000	Over 100,000	,	
		000,001 \$	550,000,001 to 100 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More that		
Estimated Liabilities  \$\begin{array}{ c c c c c c c c c c c c c c c c c c c									

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Case 15-22623 Doc 1 Filed 06/30/15 B1 (Official Form 1) (04/13) Document	Entered 06/30/15 17:0 Page 2 of 39	04:29 Desc Main
Voluntary Petition	Name of Debtor(s):	
(This page must be completed and filed in every case)	Cooper, Michael	
All Prior Bankruptcy Case Filed Within Last	8 Years (If more than two, attac	h additional sheet)
Location Where Filed: Northern District Of Illinois	Case Number: <b>07-20353</b>	Date Filed: <b>10/31/2007</b>
Location Where Filed: N/A	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	(To be completed whose debts are properties). I, the attorney for the petitioner in that I have informed the petition chapter 7, 11, 12, or 13 of tit explained the relief available under the complete of the	whibit B if debtor is an individual imarily consumer debts.) named in the foregoing petition, declare her that [he or she] may proceed under le 11, United States Code, and have der each such chapter. I further certify notice required by 11 U.S.C. § 342(b).
	X /s/ William L. Guild	6/30/15
	Signature of Attorney for Debtor(s)	Date
Exhil  Does the debtor own or have possession of any property that poses or is a or safety?  Yes, and Exhibit C is attached and made a part of this petition.		t and identifiable harm to public health
Does the debtor own or have possession of any property that poses or is a or safety?  Yes, and Exhibit C is attached and made a part of this petition.  No  Exhibit (To be completed by every individual debtor. If a joint petition is filed, each of the completed by every individual debtor.	lleged to pose a threat of imminen  bit D  ch spouse must complete and attach	
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B1 (Official Form 1) (04/13)	Page 3 of 39 Page 3				
Voluntary Petition	Name of Debtor(s):				
(This page must be completed and filed in every case)	Cooper, Michael				
Signa	atures				
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative				
I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	petition is true and correct, that I am the foreign representative of a de in a foreign proceeding, and that I am authorized to file this petition (Check only <b>one</b> box.)  I request relief in accordance with chapter 15 of title 11, Un States Code. Certified copies of the documents required by 11 U.S. § 1515 are attached.  Pursuant to 11 U.S.C. § 1511, I request relief in accordance with chapter of title 11 specified in this petition. A certified copy of order granting recognition of the foreign main proceeding is attact.				
X /s/ Michael Cooper	Signature of Foreign Representative				
Signature of Debtor Michael Cooper					
Signature of Joint Debtor	Printed Name of Foreign Representative				
	 Date				
Telephone Number (If not represented by attorney)					
June 30, 2015  Date					
Signature of Attorney*	Signature of Non-Attorney Petition Preparer				
X /s/ William L. Guild Signature of Attorney for Debtor(s)  William L. Guild 3124376 William Guild Law Offices 1N141 County Farm Road, #230 Winfield, IL 60190-0000 (630) 665-6776 Fax: (630) 668-6733 guildlaw@hotmail.com	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.  Printed Name and title, if any, of Bankruptcy Petition Preparer				
June 30, 2015	Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)				
Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Address				
Signature of Debtor (Corporation/Partnership)					
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Signature				
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.				
X Signature of Authorized Individual	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:				
	If more than one person prepared this document, attach additional sheets				
Printed Name of Authorized Individual	conforming to the appropriate official form for each person.				
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.				
Date					

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Page 4 of 39 Document **United States Bankruptcy Court** 

**Northern District of Illinois** 

IN RE:	Case No
Cooper, Michael	Chapter 13
Debtor(s)	1 -
EVHIRIT D INDIVIDITAL D	ERTOD'S STATEMENT OF COMPLIANCE

CREDIT COUNSELING REQUIREMENT Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities. Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed. 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. **✓** 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed. 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing. 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); Active military duty in a military combat zone. 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h)

does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Michael Cooper	
D / ham = 00 0045	

Date: June 30, 2015

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Document Page 5 of 39 United States Bankruptcy Court

**Northern District of Illinois** 

IN RE:		Case No
Cooper, Michael		Chapter 13
	Debtor(s)	•

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 176,660.00		
B - Personal Property	Yes	3	\$ 96,455.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 329,365.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	5		\$ 31,863.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	4			\$ 8,229.65
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 7,807.00
	TOTAL	21	\$ 273,115.00	\$ 361,228.00	

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### Document Page 6 of 39 United States Bankruptcy Court **Northern District of Illinois**

IN RE:		Case No
Cooper, Michael		Chapter 13
•	Debtor(s)	•

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

### **State the following:**

Average Income (from Schedule I, Line 12)	\$ 8,229.65
Average Expenses (from Schedule J, Line 22)	\$ 7,807.00
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1	
Line 14)	\$ 11,538.53

### **State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 101,560.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 31,863.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 133,423.00

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Case No.

Desc Main

IN RE Cooper, Michael

Debtor(s)

(If known)

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Residential property at 2313 Hudson Circle, Aurora, IL 60502		J	176,660.00	235,316.00
nesidential property at 2515 mudson Circle, Aurora, IL 60502		٦	170,000.00	235,316.00
	<u> </u>			

TOTAL

176,660.00

(Report also on Summary of Schedules)

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Desc Main

IN RE Cooper, Michael

Debtor(s)

(If known)

Case No.

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.		cash on hand		10.00
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		checking account with Bank of America		25.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		usual household goods, i pad and computer		1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Х			
6.	Wearing apparel.		usual wearing apparel		900.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	Х			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issue.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Rush University Medical Center Retirement plan with Fidelity		42,875.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14.	Interests in partnerships or joint ventures. Itemize.	Х			

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IN RE Cooper, Michael

Debtor(s)

Case No. \_\_ (If known)

### **SCHEDULE B - PERSONAL PROPERTY** (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2014 Infiniti Qx50 mileage 1,700		30,282.00
		.,	2015 Buick Lacrosse, mileage 15,000		20,863.00
	Boats, motors, and accessories.	X			
	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			

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IN RE Cooper, Michael

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Case No. \_\_

Debtor(s)

(If known)

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
35. Other personal property of any kind not already listed. Itemize.	Х			
not ancady instea. Reminze.				
		TO	ΓAL	96,455.00

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IN RE Cooper, Michael

Debtor(s)

(If known)

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:  $(Check\ one\ box)$ 

Check if debtor claims a homestead exemption that exceeds \$155,675. \*

Case No. \_

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY			
Residential property at 2313 Hudson Circle, Aurora, IL 60502	735 ILCS 5/12-901	15,000.00	176,660.0
SCHEDULE B - PERSONAL PROPERTY			
ash on hand	735 ILCS 5/12-1001(b)	10.00	10.0
hecking account with Bank of America	735 ILCS 5/12-1001(b)	25.00	25.0
usual household goods, i pad and computer	735 ILCS 5/12-1001(b)	1,500.00	1,500.0
usual wearing apparel	20 ILCS 1805/10	900.00	900.0
Rush University Medical Center Retirement lan with Fidelity	40 ILCS 5/8-244, 5/9-228, 5/14-147	42,875.00	42,875.0
2014 Infiniti Qx50 mileage 1,700	735 ILCS 5/12-1001(c)	2,400.00	30,282.0
2015 Buick Lacrosse, mileage 15,000	735 ILCS 5/12-1001(b)	2,390.00	20,863.0

<sup>\*</sup> Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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IN RE Cooper, Michael

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Debtor(s)

(If known)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0718	Х	J	mortgage loan on residential property at	T			235,316.00	58,656.00
Bayview Loan Servicing 62516 Collection Center Drive Chicago, IL 60693			2313 Hudson Circle, Aurora, IL 60502					
			VALUE \$ 176,660.00					
ACCOUNT NO. 0122		Н	2015 Buick Lacrosse				52,996.00	32,133.00
TD Auto Finance PO Box 9223 Farmington, MI 48333								
			VALUE \$ 20,863.00	1				[
ACCOUNT NO. 0124		Н	2014 Infiniti Qx50				41,053.00	10,771.00
TD Auto Finance PO Box 9223 Farmington, MI 48333			VALUE \$ <b>30,282.00</b>					
A CCOLINE NO	+		VALUE \$ 30,202.00	+	$\vdash$			
ACCOUNT NO.			VALUE \$					
<b>0</b> continuation sheets attached	,	•	(Total of the		otota		\$ 329,365.00	\$ 101,560.00

Total (Use only on last page)

\$ 329,365.00 (Report also on Summary of a

Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

101,560.00

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IN RE Cooper, Michael

Case No. Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed

Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts $\underline{not}$ entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.
0 continuation sheets attached

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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>5727</b>		w	medical bill				
ACL Laboratories PO Box 27901 West Allis, WI 53227							58.00
ACCOUNT NO. <b>0133</b>		Н	personal loan			H	
Advance Paycheck Inc 4732 N. Austin Ave. Chicago, IL 60630							1,503.00
ACCOUNT NO. 7810		Н	credit card				
Amazon PO Box 965015 Orlando, FL 32896							634.00
ACCOUNT NO. 9197		Н	personal loan			H	304.00
AmeriCash Loan 848 N. Rt 59 Aurora, IL 60504							
							1,100.00
d continuation sheets attached			(Total of th	Sub is p			\$ 3,295.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules and, if applicable, on the S Summary of Certain Liabilities and Relate	also atis	tica	n al	\$

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Debtor(s)

(If known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		((	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>0000</b>		Н	personal loan				
Archerfield 3601 PGA Boulevard, Suite 200 Palm Beach Gardens, FL 33410							2,525.00
ACCOUNT NO. <b>0000</b>		w	dental bill	$\dagger$			
Ashton Dental P.C. 1137 N. Eola Road, Suite 109 Aurora, IL 60504							34.00
ACCOUNT NO. <b>0640</b>		н	personal loan	+			34.00
Brookwood Loans PO Box 5970 Alpharetta, GA 30023							1,200.00
ACCOUNT NO. <b>0585</b>		Н	credit card			Н	1,200.00
Capital One Bank PO Box 30281 Salt Lake City, UT 84130							1 824 00
ACCOUNT NO. <b>0597</b>		н	credit card	+			1,821.00
Capital One Bank PO Box 30281 Salt Lake City, UT 84130							4 740 00
ACCOUNT NO. <b>7830</b>		н	medical bill	+		Н	1,710.00
Center For Derm.& Skin Cancer, LTD 2500 S. Highland Ave., Suite 200 Lombard, IL 60148							
				-		Ц	286.00
ACCOUNT NO. 9795	-	Н	credit card				ı
Comenity Capital/HSN PO Box 182120 Columbus, OH 43218							
				L		Ц	98.00
Sheet no. 1 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of to (Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the S	t als	age Fota o o	e) al n al	\$ 7,674.00
			Summary of Certain Liabilities and Relate				\$

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Debtor(s)

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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

			Continuation Sneet)		_		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 9446	T	Н	credit card	t			
Credit First 6275 Eastland Rd Brookpark, OH 44142							000 00
ACCOUNT NO. <b>1280</b>		Н	credit card	+			989.00
Credit One Bank PO Box 98872 Las Vegas, NV 89193							007.00
ACCOUNT NO. R000		W	medical bill	+	-		887.00
Dermatology Associates Ltd 18425 West Creek Drive, Suite F Tinley Park, IL 60477							40.00
ACCOUNT NO. <b>7712</b>		Н	credit card	+			40.00
Evine Live PO Box 965005 Orlando, FL 32896							286.00
ACCOUNT NO. <b>7200</b>		Н	personal loan	$^{+}$	H		200.00
Express Cash Mart Of Illinois LLC Mountain Summit Financial 635 East Hwy 20 F Upper Lake, CA 95485							371.00
ACCOUNT NO. <b>0000</b>		Н	personal loan	$\dagger$			071.00
Greenvalley Cash LLC PO Box 615 Hays, MT 59527							575.00
ACCOUNT NO. <b>0540</b>		н	personal loan	+			575.00
Illinois Lending Corp 15008 S. LaGrange Road Orland Park, IL 60462							1 400 00
Sheet no. 2 of 4 continuation sheets attached to	_			Sub	L tot	L al	1,400.00
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	his p	oage	e)	\$ 4,548.00
			(Use only on last page of the completed Schedule F. Repo- the Summary of Schedules, and if applicable, on the S	rt als		n	

the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) \$

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Debtor(s)

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### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3865		Н	credit card	t		Н	
Kohls PO Box 3115 Milwaukee, WI 53201-4000							681.00
ACCOUNT NO. <b>0000</b>		J	homeowners assoc. dues	H		H	
Legacy Fields Condominium Assoc PO Box 7676 Carol Stream, IL 60197							473.00
ACCOUNT NO. 2108		Н	personal loan	+		Н	473.00
Mountain Summit Financial 635 East Hwy 20 F Upper Lake, CA 95485							500.00
ACCOUNT NO. <b>5310</b>		Н	credit card	H		Н	300.00
Paypal PO Box 965005 Orlando, FL 32896							2,033.00
ACCOUNT NO. <b>5584</b>		Н	medical bill	t		Н	2,033.00
Quest Diagnostics PO Box 7306 Hollister, MO 65673							22.00
ACCOUNT NO. <b>7610</b>		н	credit card	╁		Н	23.00
QVC PO Box 965005 Orlando, FL 32896							
						Ш	501.00
ACCOUNT NO. 5390  Rish, Inc. DBA LendUp 237 Kearny St. #372 San Fransciso, CA 94108		Н	persoani loan				
							400.00
Sheet no. 3 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the	7	age Fota	e) al	\$ 4,611.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Related	t als tatis	o o	n al	\$

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(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

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Debtor(s)

(If known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(•	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>0822</b>		w	medical bill	$^{\dagger}$			
Rush Copley Medical Center 2000 Ogden Ave. Aurora, IL 60504							150.00
ACCOUNT NO. <b>0000</b>		W	medical bill	+			150.00
Rush University Medical Center 1653 W. Congress Parkway Chicago, IL 60612							05.00
ACCOUNT NO. <b>6476</b>		Н	personal loan	+			95.00
Springleaf 866 N. Lake Street Aurora, IL 60506	-	••	porochai louir				9,154.00
ACCOUNT NO. 2033		Н	credit card				9,134.00
Walmart PO Box 965024 El Paso, TX 79998							
							809.00
ACCOUNT NO. 3841  Zingo Cash Illinois LLC 200 N. Fairway Dr. Suite 180  Vernon Hills, IL 60061	-	Н	personal loan				1,527.00
ACCOUNT NO.	-						1,021100
ACCOUNT NO.	-						
Sheet no. 4 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his p			\$ 11,735.00

R6G (Official FCASE) 15-122623	Doc 1	Filed 06/30/15	Entered 06/30/15 17:04:29
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IN RE Cooper, Michael Document Page 19 of 39

Case No.

Debtor(s)

Desc Main

(If known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
<del></del>	

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Desc Main

IN RE Cooper, Michael

Debtor(s)

Case No. \_ (If known)

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check	this	hox	if de	htor	has no	codebtors.

Check this box if debtor has no codebtors.					
NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR				
Erlinda Fleming-Cooper 2313 Hudson Circle Aurora, IL 60502	Bayview Loan Servicing 62516 Collection Center Drive Chicago, IL 60693				

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Fill in this information to identify	your case:				
Mishaal Osanan					
Debtor 1 Michael Cooper First Name	Middle Name	Last Name		-	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	Northern District of Illinois				
Case number		-		Check if the	nis is:
(If known)					ended filing
					plement showing post-petition er 13 income as of the following date:
Official Form 6I					D / YYYY
Schedule I: You	ır Income			, 2	12/13
					or 2), both are equally responsible for
	use is not filing with you e top of any additional pa	, do not include in	format	ion about your spor	rou, include information about your spouse use. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<ul><li>✓ Employed</li><li>✓ Not employ</li></ul>	/ed		Employed  Not employed
Include part-time, seasonal, or self-employed work.		Clinical Prog	ram (	`oordinator	
Occupation may Include student or homemaker, if it applies.	Occupation	_			
	Employer's name	Rush Univers	sity M	edical Center	
	Employer's address	1653 W. Cong Number Street		Parkway	Number Street
		Chicago, IL 6	60612- State		City State ZIP Code
	How long employed th	ere? 16 years	_		
Part 2: Give Details Abou	t Monthly Income				
Estimate monthly income as o	f the date you file this for	rm. If you have noth	nina to	report for any line, wr	rite \$0 in the space. Include your non-filing
spouse unless you are separated If you or your non-filing spouse h below. If you need more space, a	d. ave more than one employ	yer, combine the inf	_		-
				For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, sa deductions). If not paid monthly			2.	\$ 8,872.18	\$0.00
3. Estimate and list monthly over	rtime pay.		3.	+\$0.00	+ \$0.00
4. Calculate gross income. Add	ine 2 + line 3.		4.	\$ 8.872.18	\$ 0.00

Official Form 6l Schedule I: Your Income page 1

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Debtor 1

Michael Cooper
First Name Middle Name

Last Name

Case number (if known)

		For	r Debtor 1		ebtor 2 or ling spouse	
Copy line 4 here	<b>→</b> 4.	\$	8,872.18	\$	0.00	
		7		7		
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	\$	2,008.69	\$	0.00	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
5e. Insurance	5e.	\$	0.00	\$	0.00	
5f. Domestic support obligations	5f.	\$	0.00	\$	0.00	
5g. <b>Union dues</b>	5g.	\$	0.00	\$	0.00	
5h. Other deductions. Specify: See Schedule Attached	5h.	+\$	1,080.84	+ \$	0.00	
6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$	3,089.53	\$	0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,782.65	\$	0.00	
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
8b. Interest and dividends	8b.	\$	0.00	\$	0.00	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent					
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
8d. Unemployment compensation	8d.	\$	0.00	\$	0.00	
8e. Social Security	8e.	\$	0.00	\$	0.00	
8f. Other government assistance that you regularly receive						
Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	тсе	\$	0.00	\$	1,927.00	
Specify: Social Security Disability	8f.					
8g. Pension or retirement income	8g.	\$	0.00	\$	0.00	
8h. Other monthly income. Specify: Health Care Total	8h.	+\$	520.00	+\$	0.00	
		, *_		\$		
9. <b>Add all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	<b>\$</b>	520.00	Φ	1,927.00	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$	6,302.65	\$	1,927.00	= \$8,229.65_
11. State all other regular contributions to the expenses that you list in Schee	وارية	,—		<b>L</b>		<u> </u>
Include contributions from an unmarried partner, members of your household, yother friends or relatives.			ents, your room	mates, ar	nd	
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable	e to pay expense	es listed i	in Schedule J.	
Specify:				_	11.	+ \$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The				-		\$ 8,229.65
Write that amount on the Summary of Schedules and Statistical Summary of C	ertairi	LIADIII	ties and Related	<i>l Data,</i> Ir i	it applies 12.	Combined
40 Do you owned an increase or decrease within the year after you file this	form	3				monthly income
13. Do you expect an increase or decrease within the year after you file this	1011111					
Yes. Explain: See Continuation Sheet						

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\_\_\_ Case No. \_\_\_\_

IN RE Cooper, Michael

Debtor(s)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

**Continuation Sheet - Page 1 of 2** 

	DEBTOR	SPOUSE
Other Payroll Deductions:		
Giftshop (Supplies)	273.86	0.00
Medcare	209.40	0.00
Medical	343.38	0.00
Dental	67.44	0.00
Vision	19.48	0.00
Hartfordsuplf	38.94	0.00
Parking	72.70	0.00
Giftshop (Supplies)	47.98	0.00
Harfordsuplf	7.66	0.00

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IN RE Cooper, Michael

Debtor(s)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Case No. \_

**Continuation Sheet - Page 2 of 2** 

Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor's second job changes effective July 1, 2015, reducing patients from 10 to 8 and he no longer gets reimbursed for his travel expenses, with 8 paitents at \$65 a month = \$520.00

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Fill in this information to identify your case:			
Debtor 1 Michael Cooper			
First Name Middle Name Last Name	Check if this		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amen	-	1
United States Bankruptcy Court for the: Northern District of Illinois		ment showing post- as of the following	•
Case number	MM / DD /		
(If known)		te filing for Debtor 2	
Official Form 6J	maintains	s a separate househ	nold
Schedule J: Your Expenses			12/13
Be as complete and accurate as possible. If two married people are filir information. If more space is needed, attach another sheet to this form. (if known). Answer every question.			_
Part 1: Describe Your Household			
1. Is this a joint case?			
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?			
<ul><li>No</li><li>☐ Yes. Debtor 2 must file a separate Schedule J.</li></ul>			
2. Do you have dependents?	Denon double valetiens him to	Do non dontio	Dana danandani livo
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	De pendent's age	Does dependent live with you?
Do not state the dependents'	Son	<u>24</u>	No Yes
names.			☐ No
			☐ Yes
			☐ No
			☐ Yes
			☐ No ☐ Yes
			☐ No
			Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are expenses as of a date after the bankruptcy is filed. If this is a supplement applicable date.	=		
Include expenses paid for with non-cash government assistance if you		Your exper	1000
such assistance and have included it on Schedule I: Your Income (Office	-	Tour exper	1565
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	first mortgage payments and	4. \$ <b>1,603</b>	3.00
If not included in line 4:			
4a. Real estate taxes		4a. \$ 0.0	
4b. Property, homeowner's, or renter's insurance		4b. \$ 30.	
4c. Home maintenance, repair, and upkeep expenses		4c. \$ 100	
4d. Homeowner's association or condominium dues		4d. \$ <b>150</b>	.00

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Debtor 1

Michael Cooper First Name Middle Name Last Name

Case number (if known)\_

8. Additional mortgage payments for your residence, such as home equity loans 8. Unlitties: 6a. Electricity, heat, natural gas 6a. S. 220.00 6b. Mater, sever, gathage collection 6c. Telephone, cell phone, internet, satellite, and cable services 6c. S. 605.00 6c. Other, Specify. 6c. Other Specify. 6c. Other specification octats 6c. Other insurance. 6c. Other Specify. 6c. Other insurance on other property 6c. Other spayments for Vehicle 1 form flow. 6c. Other insurance on other property 6c. Other real property expenses not included in lines 4 or 5 of this form or on Schedule b. Your Income. 6c. Other spayments so other property 6c. Other real property expenses not included in lines 4 or 5 of this form or on Schedule b. Your Income. 6c. Other real property expenses not included in lines 4 or 5 of this form or on Schedule b. Your Income. 6c. Other spayments or or condemina				Your expenses
Box   Company	5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6a. Electricity, heat, natural gas 6b. Water, saver, gathage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$605.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$605.00 6c.	6	Utilities:		
6c. Telephone, cel phone, Internet, satellite, and cable services 6d. Other. Specify.	•		6a.	\$220.00
6d. Other. Specify   6d. S   0.00		6b. Water, sewer, garbage collection	6b.	\$198.00
7. Food and housekeeping supplies 7. \$ 675.00   8. Childcare and children's education costs 8. \$ 0.00   9. Clothing, laundry, and dry cleaning 9. \$ 200.00   10. Personal care products and services 10. \$ 100.00   11. Medical and dental expenses 11. \$ 50.00   12. Transportation. Include gas. maintenance, bus or train fare. Do not include car payments. 12. \$ 700.00   13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 80.00   14. Charitable contributions and religious donations 14. \$ 622.00   15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance 15b. Health insurance 15b. \$ 0.00   15b. Health insurance 15c. \$ 433.00   15c. Vehicle insurance 15c. \$ 433.00   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Vehicle insurance 15c. \$ 433.00   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   15c. Taxes. Do not include taxes taxes   200.   15c. Taxes. Taxes. Taxes   200.   15c. Taxes. Taxes. Taxes   200.		6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$605.00
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 200.00 10. Personal care products and services 11. Medical and dental expenses 11. \$ 50.00 11. Medical and dental expenses 11. \$ 50.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 80.00 14. Charitable contributions and religious donations 15. Insurance 16. Insurance 17. Insurance 18. \$ 0.00 18. University of the insurance deducted from your pay or included in lines 4 or 20. 18. Life insurance 18. \$ 0.00 18. Vehicle insurance 18. \$ 0.00 18. Vehicle insurance 18. \$ 0.00 18. Vehicle insurance 18. \$ 0.00 18. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 19. Installment or lease payments: 17. Installment or lease payments: 17. Car payments for Vehicle 1 17. Car payments for Vehicle 2 17. Cother. Specify. 17. Other. Specify. 17. Other. Specify. 17. Other. Specify. 18. \$ 0.00 19. Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1 Your Income (Official Form 6). 19. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1. Your Income. 20. Mortgages on other property 20. Mortgages on other property 20. Real estate taxes 20. \$ 0.00 20. Maintenance, repair, and upkeep expenses		6d. Other. Specify:	6d.	\$0.00
10.   Clothing, laundry, and dry cleaning   9.   \$ 200.00     10.   Personal care products and services   10.   \$ 100.00     11.   Medical and dental expenses   11.   \$ 50.00     12.   Transportation, include gas, maintenance, bus or train fare.   12.   \$ 700.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$ 80.00     14.   Charitable contributions and religious donations   14.   \$ 622.00     15.   Insurance   15.   \$ 0.00     15.   Insurance   15.   \$ 0.00     15.   Least in insurance   15.   \$ 0.00     15.   Least in insurance   15.   \$ 0.00     15.   Vehicle insurance   15.   \$ 0.00     16.   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.     Specify	7.	Food and housekeeping supplies	7.	\$675.00
10. Personal care products and services 11. Medical and dental expenses 11. \$ 50.00  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00  15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Other insurance, Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Other insurance, Specify: 16d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not included taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not included from your pay or included in lines 4 or 20. 15d. Taxes. Do not included in lines 4 or 5 of this form or on Schedule k. Your Income. 15d. Taxes. Do not included in lines 4 or 5 of this form or on Schedule k. Your Income. 15d. Taxes. Do not included in lines 4 or 5 of this form or on Schedule k. Your Income. 15d. Taxes. Do not included in lines 4 or 5 of this form or on Schedule k. Your Income. 15d. Taxes. Do not included in lines 4 or 5 of this form or on Schedule k. Your Income. 15d. Taxes. Do not included in lines 4 or 5 of this form or on Schedule k. Your Income. 15d	8.	Childcare and children's education costs	8.	\$0.00
10. Personal care products and services 11. Medical and dental expenses 11. S 50.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. S 700.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. S 80.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Life insurance 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17e. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other payments you make to support others who do not live with you. Specify: 17e. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mottgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, a	9.	Clothing, laundry, and dry cleaning	9.	\$200.00
12.   Transportation. Include gas, maintenance, bus or train fare.   12.   \$ 700.00	10.		10.	\$100.00
12.   Transportation. Include gas, maintenance, bus or train fare.   12.   \$ 700.00	11.		11.	\$50.00
14. Charitable contributions and religious donations       14. \$ 622.00         15. Insurance.       5. Do not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a. \$ 0.00         15b. Health insurance       15b. \$ 0.00         15c. Vehicle insurance.       15c. \$ 433.00         15d. Other insurance. Specify:	12.	Transportation. Include gas, maintenance, bus or train fare.	12.	\$700.00
14. Charitable contributions and religious donations       14. \$ 622.00         15. Insurance.       5. Do not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a. \$ 0.00         15b. Health insurance       15b. \$ 0.00         15c. Vehicle insurance.       15c. \$ 433.00         15d. Other insurance. Specify:	13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$80.00
Do not include insurance deducted from your pay or included in lines 4 or 20.    15a. Life insurance	14.		14.	
15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. \$ 0.00  15d. Other insurance. Specify: 15d. \$ 0.00  15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16e.  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S 0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  19. Other payments you make to support others who do not live with you. Specify: 19.  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses	15.			
15c. Vehicle insurance       15c. \$ 433.00         15d. Other insurance. Specify:		15a. Life insurance	15a.	\$0.00
15d. Other insurance. Specify: 15d. \$ 0.00 15d. \$ 0.00 16d. \$		15b. Health insurance	15b.	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:		15c. Vehicle insurance	15c.	\$433.00
Specify:		15d. Other insurance. Specify:	15d.	\$
17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Specify:  17d. \$ 0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  19. Other payments you make to support others who do not live with you.  Specify:  19.  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses	16.		16.	\$
17b. Car payments for Vehicle 2  17c. Other. Specify:	17.	Installment or lease payments:		
17c. Other. Specify:			17a.	\$1,049.00
17c. Other. Specify:			17b.	\$715.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  19. Other payments you make to support others who do not live with you.  Specify:			17c.	\$
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses			17d.	\$
Specify:	18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$
Specify:	19.	Other payments you make to support others who do not live with you.		¢ 0.00
20a. Mortgages on other property       20a. \$			19.	ψ
20a. Mortgages on other property       20a. \$	20.		ne.	
20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00				\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$				\$0.00
20d. Maintenance, repair, and upkeep expenses  20d. \$				

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Debtor 1	Michael Cooper First Name Middle Name Last Name	Case number (if known)		
21. Other	. Specify: Expenses Related To Second Job.	21.	+\$	250.00
2. Your	monthly expenses. Add lines 4 through 21.		•	7,807.00
The re	sult is your monthly expenses.	22.	Ψ	7,807.00
3. Calcula	ate your monthly net income.			
23a. (	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,229.65
23b. C	Copy your monthly expenses from line 22 above.	23b.	-\$	7,807.00
	Subtract your monthly expenses from your monthly income.		\$	422.65
'	The result is your <i>monthly net income</i> .	23c.		
For exa	u expect an increase or decrease in your expenses within the year after ample, do you expect to finish paying for your car loan within the year or do age payment to increase or decrease because of a modification to the terms	you expect your		
Yes				

(Print or type name of individual signing on behalf of debtor)

IN RE Cooper, Michael

Debtor(s)

Case No. (If known)

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 23 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: June 30, 2015 Signature: /s/ Michael Cooper Michael Cooper Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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		Northam Dist		

Northern District of Illinois

IN DE.	Com No
IN RE:	Case No
Cooper, Michael	Chapter 13
Debtor(s)	
STATEMENT OF FINA	NCIAL AFFAIRS
This statement is to be completed by every debtor. Spouses filing a joint petitic is combined. If the case is filed under chapter 12 or chapter 13, a married debtor is filed, unless the spouses are separated and a joint petition is not filed. An ind farmer, or self-employed professional, should provide the information requested opersonal affairs. To indicate payments, transfers and the like to minor children, s guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose Questions 1 - 18 are to be completed by all debtors. Debtors that are or have	must furnish information for both spouses whether or not a joint petition ividual debtor engaged in business as a sole proprietor, partner, family on this statement concerning all such activities as well as the individual's tate the child's initials and the name and address of the child's parent of the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m)
25. If the answer to an applicable question is "None," mark the box labeled use and attach a separate sheet properly identified with the case name, case num	"None." If additional space is needed for the answer to any question,
DEFINITIO	NS
"In business." A debtor is "in business" for the purpose of this form if the debt for the purpose of this form if the debtor is or has been, within six years immedia an officer, director, managing executive, or owner of 5 percent or more of the vopartner, of a partnership; a sole proprietor or self-employed full-time or part-time form if the debtor engages in a trade, business, or other activity, other than as an engage." This ider. "The term "insider" includes but is not limited to: relatives of the definition of the debtor engages."	ately preceding the filing of this bankruptcy case, any of the following sting or equity securities of a corporation; a partner, other than a limited e. An individual debtor also may be "in business" for the purpose of this imployee, to supplement income from the debtor's primary employment.
which the debtor is an officer, director, or person in control; officers, directors affiliates of the debtor and insiders of such affiliates; any managing agent of the	, and any persons in control of a corporate debtor and their relatives;
1. Income from employment or operation of business	
None State the gross amount of income the debtor has received from employr including part-time activities either as an employee or in independent traccase was commenced. State also the gross amounts received during the maintains, or has maintained, financial records on the basis of a fiscal r beginning and ending dates of the debtor's fiscal year.) If a joint petition i under chapter 12 or chapter 13 must state income of both spouses whether joint petition is not filed.)	de or business, from the beginning of this calendar year to the date this e <b>two years</b> immediately preceding this calendar year. (A debtor that ather than a calendar year may report fiscal year income. Identify the s filed, state income for each spouse separately. (Married debtors filing
AMOUNT SOURCE 37,453.00 2015 JanMay	

104,127.00 2014 97,931.00 2013

### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE 5,582.00 2014 Jan.-June Income on 2nd job will be reduced efective July 1, 2015

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 7. Gifts

None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

OR ORGANIZATION The Israel Of God Church 2515 E. 75th Street Chicago, IL 60649-0000

NAME AND ADDRESS OF PERSON

**RELATIONSHIP TO** DEBTOR, IF ANY

DATE OF GIFT 2014

DESCRIPTION AND VALUE OF GIFT contribution \$7,994.00

### 8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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9. Payments related to debt counseling or bankruptcy	g	
None List all payments made or property transferred by o consolidation, relief under the bankruptcy law or pre of this case.		
NAME AND ADDRESS OF PAYEE William L. Guild 1N141 County Farm Road, Suite 230 Winfield, IL 60190-0000	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR <b>06/12/15</b>	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 1,312.50
10. Other transfers		
None a. List all other property, other than property transf absolutely or as security within <b>two years</b> immedichapter 13 must include transfers by either or both petition is not filed.)	ately preceding the commencement of this case	se. (Married debtors filing under chapter 12 or
None b. List all property transferred by the debtor within <b>t</b> device of which the debtor is a beneficiary.	en years immediately preceding the commence	ment of this case to a self-settled trust or similar
11. Closed financial accounts		
None List all financial accounts and instruments held in transferred within <b>one year</b> immediately precedir certificates of deposit, or other instruments; shares brokerage houses and other financial institutions, accounts or instruments held by or for either or bor petition is not filed.)	ng the commencement of this case. Include c s and share accounts held in banks, credit unic (Married debtors filing under chapter 12 or ch	hecking, savings, or other financial accounts, ins, pension funds, cooperatives, associations, apter 13 must include information concerning
NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
Bank Of America Aurora, IL	checking account #4534	\$10 March 2015
12. Safe deposit boxes		
None List each safe deposit or other box or depository in preceding the commencement of this case. (Married both spouses whether or not a joint petition is filed.)	d debtors filing under chapter 12 or chapter 13	must include boxes or depositories of either or
13. Setoffs		
None List all setoffs made by any creditor, including a back case. (Married debtors filing under chapter 12 or case petition is filed, unless the spouses are separated as	chapter 13 must include information concerning	
14. Property held for another person		

None

List all property owned by another person that the debtor holds or controls.

### 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

### 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

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### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 $\checkmark$ 

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

 $\checkmark$ 

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

### 18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpaver-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

 $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Date: <b>June 30, 2015</b>	Signature /s/ Michael Cooper	
	of Debtor	Michael Cooper
Date:	Signature of Joint Debtor (if any)	
	<b>0</b> continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

# @ 1993-2013 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

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IN	NRE:	Case No	
Cooper, Michael		Chapter 13	
	Debtor(s		
	DISCLOSURE OF O	COMPENSATION OF ATTORNEY FOR DEBTOR	
1.		16(b), I certify that I am the attorney for the above-named debtor(s) and that compor agreed to be paid to me, for services rendered or to be rendered on behalf of the s:	
	For legal services, I have agreed to accept		. \$ <b>2,630.00</b>
	Prior to the filing of this statement I have received		. \$1,315.00
	Balance Due		. \$ 1,315.00
2.	The source of the compensation paid to me was:	ebtor Other (specify):	
3.	The source of compensation to be paid to me is:	ebtor Other (specify):	
4.	I have not agreed to share the above-disclosed comp	pensation with any other person unless they are members and associates of my law	firm.
	I have agreed to share the above-disclosed compens together with a list of the names of the people sharin	sation with a person or persons who are not members or associates of my law firming in the compensation, is attached.	. A copy of the agreement,
5.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspects of the bankruptcy case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> </ul>		
	<ul> <li>d. Representation of the debtor in adversary proceeding</li> <li>e. [Other provisions as needed]</li> </ul>	gs and other contested bankruptey matters;	
6.	By agreement with the debtor(s), the above disclosed fee Contested hearings, Reaffirmation Agreer		
		CERTIFICATION	
	certify that the foregoing is a complete statement of any agoroceeding.	greement or arrangement for payment to me for representation of the debtor(s) in the	is bankruptcy
	June 30, 2015	/s/ William L. Guild	
	Date	William L. Guild 3124376 William Guild Law Offices 1N141 County Farm Road, #230 Winfield, IL 60190-0000 (630) 665-6776 Fax: (630) 668-6733 guildlaw@hotmail.com	

### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### **Chapter 7:** Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

Page 2

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

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IN RE:		Case No
Cooper, Michael		Chapter <b>13</b>
	Debtor(s)	•
	VERIFICATION OF CRED	ITOR MATRIX
		Number of Creditors31
The above-named Debtor(s)	hereby verifies that the list of creditors	is true and correct to the best of my (our) knowledge.
Date: June 30, 2015	/s/ Michael Cooper Debtor	

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Cooper, Michael 2313 Hudson Cir Aurora, IL 60502 Document Pa Capital One Bank PO Box 30281 Salt Lake City, UT 84130

Kohls PO Box 3115

Milwaukee, WI 53201-4000

William Guild Law Offices 1N141 County Farm Road, #230 Winfield, IL 60190-0000 Center For Derm.& Skin Cancer, LTD 2500 S. Highland Ave., Suite 200

Lombard, IL 60148

Legacy Fields Condominium Assoc

PO Box 7676 Carol Stream, IL 60197

ACL Laboratories PO Box 27901 West Allis, WI 53227 Comenity Capital/HSN PO Box 182120 Columbus, OH 43218

Mountain Summit Financial 635 East Hwy 20 F Upper Lake, CA 95485

Advance Paycheck Inc 4732 N. Austin Ave. Chicago, IL 60630 Credit First 6275 Eastland Rd Brookpark, OH 44142 Paypal PO Box 965005 Orlando, FL 32896

Amazon PO Box 965015 Orlando, FL 32896 Credit One Bank PO Box 98872 Las Vegas, NV 89193 Quest Diagnostics PO Box 7306 Hollister, MO 65673

AmeriCash Loan 848 N. Rt 59 Aurora, IL 60504 Dermatology Associates Ltd 18425 West Creek Drive, Suite F

Tinley Park, IL 60477

QVC PO Box 965005 Orlando, FL 32896

Archerfield 3601 PGA Boulevard, Suite 200 Palm Beach Gardens, FL 33410 Evine Live PO Box 965005 Orlando, FL 32896 Rish, Inc. DBA LendUp 237 Kearny St. #372 San Fransciso, CA 94108

Ashton Dental P.C. 1137 N. Eola Road, Suite 109 Aurora, IL 60504 Express Cash Mart Of Illinois LLC Mountain Summit Financial 635 East Hwy 20 F Upper Lake, CA 95485 Rush Copley Medical Center 2000 Ogden Ave. Aurora, IL 60504

Bayview Loan Servicing 62516 Collection Center Drive Chicago, IL 60693 Greenvalley Cash LLC PO Box 615 Hays, MT 59527 Rush University Medical Center 1653 W. Congress Parkway Chicago, IL 60612

Brookwood Loans PO Box 5970 Alpharetta, GA 30023 Illinois Lending Corp 15008 S. LaGrange Road Orland Park, IL 60462 Springleaf 866 N. Lake Street Aurora, IL 60506 Case 15-22623 Doc 1 Filed 06/30/15 Entered 06/30/15 17:04:29 Desc Main Document Page 38 of 39

TD Auto Finance PO Box 9223 Farmington, MI 48333

Walmart PO Box 965024 El Paso, TX 79998

Zingo Cash Illinois LLC 200 N. Fairway Dr. Suite 180 Vernon Hills, IL 60061

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IN RE:		Case No.
Cooper, Michael		Chapter 13
	Debtor(s)	

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE				
Certificate of [Non-Attorney]	Bankruptcy Petition Preparer			
I, the [non-attorney] bankruptcy petition preparer signing the debto notice, as required by § 342(b) of the Bankruptcy Code.	r's petition, hereby certify that I deli	vered to the debtor the attached		
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	petition pre the Social S principal, re	parer is not an individual, state Security number of the officer, esponsible person, or partner of otcy petition preparer.)		
X	(Required I	by 11 U.S.C. § 110.)		
Signature of Bankruptcy Petition Preparer of officer, principal, respartner whose Social Security number is provided above.	ponsible person, or			
Certificate	of the Debtor			
I (We), the debtor(s), affirm that I (we) have received and read the	attached notice, as required by § 342	2(b) of the Bankruptcy Code.		
Cooper, Michael	X /s/ Michael Cooper	6/30/2015		
Printed Name(s) of Debtor(s)	Signature of Debtor	Date		
Case No. (if known)	X	y) Date		

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.